



FAX COVER SHEET

S. C. Johnson & Son, Inc.
1525 Howe Street
Racine, WI 53403-2236
262-260-2000
Law Department

DATE: January 24, 2002

TO: Examiner E. Elhilo
U.S. Patent and Trademark Office
Group Art 1751

FAX: 703 - 746-7171

FROM: SHARON L. KLAUS
U.S. PATENT PARALEGAL
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Phone: (262) 260-2211
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Pages Including This Cover Page:

COMMENTS:

RE: Application No. 09/629,368
Filed: 7/31/00

Dear Examiner Elhilo:

Per our conversation, attached is a copy of the Amendment, as filed, on December 19, 2001. As I stated, we have not received the post card back from the patent office. If you need anything further, please let me know.

Thank you.

Via Facsimile:

The information contained in this communication is confidential, may be attorney-client privileged, and is intended only for the use of the addressee. Unauthorized use, disclosure or copying is strictly prohibited. If you have received this communication in error, please immediately notify us collect, at the contact number below, so that we can arrange for the retrieval of the original document at our cost. Thank you.

Contact Information: Sharon Klaus

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PTO/SB/17 (10-01)

Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 920.00)

Complete if Known

Application Number	09/629,368
Filing Date	July 31, 2000
First Named Inventor	Babinski et al.
Examiner Name	E. Elhilo
Group Art Unit	1751
Attorney Docket No.	J-2990

METHOD OF PAYMENT

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:
Deposit Account Number **10-0849**

Deposit Account Name **S.C. JOHNSON & SON, INC.**

Charge Any Additional Fee Required
Under 37 CFR 1.16 and 1.17

Applicant claims small entity status.
See 37 CFR 1.27

2. Payment Enclosed:
 Check Credit card Money Order Other

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Fee Code (S)	Large Entity Fee Code (S)	Small Entity Fee Code (S)	Fee Description	Fee Paid
105	190	205	65 Surcharge - late filing fee or oath	
127	50	227	26 Surcharge - late provisional filing fee or cover sheet	
139	190	139	130 Non-English specification	
147	2,520	147	2,520 For filing a request for ex parte reexamination	
112	920*	112	920* Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840* Requesting publication of SIR after Examiner action	
115	110	215	55 Extension for reply within first month	
116	400	216	200 Extension for reply within second month	
117	920	217	460 Extension for reply within third month	920
118	1,440	218	720 Extension for reply within fourth month	
128	1,960	228	980 Extension for reply within fifth month	
119	320	219	160 Notice of Appeal	
120	320	220	160 Filing a brief in support of an appeal	
121	280	221	140 Request for oral hearing	
138	1,510	138	1,510 Petition to institute a public use proceeding	
140	110	240	55 Petition to revive - unavoidable	
141	1,280	241	640 Petition to revive - unintentional	
142	1,280	242	640 Utility issue fee (or reissue)	
143	460	243	230 Design issue fee	
144	620	244	310 Plant issue fee	
122	130	122	130 Petitions to the Commissioner	
123	50	123	50 Processing fee under 37 CFR 1.17(d)	
126	180	126	180 Submission of Information Disclosure Stmt	
581	40	581	40 Recording each patent assignment per property (times number of properties)	
148	740	248	370 Filing a submission after final rejection (37 CFR § 1.128(e))	
149	740	249	370 For each additional invention to be examined (37 CFR § 1.129(b))	
179	740	279	370 Request for Continued Examination (RCE)	
168	900	169	900 Request for expedited examination of a design application	
Other fee (specify) _____				
*Reduced by Basic Filing Fee Paid				SUBTOTAL (3) (\$ 920.00)

*or number previously paid, if greater. For Reissues, see above

SUBMITTED BY		Complete if Applicable		
Name (Print/Type)	Herbert W. Mylius	Registration No. (Attorney/Agent)	24,578	Telephone 262-260-2715
Signature	<i>Herbert W. Mylius</i>		Date	12/19/01

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box →

PTO/SB/21 (08-00)

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

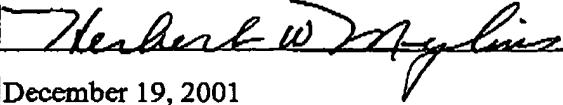
Total Number of Pages in This Submission

Application Number	09/629,368
Filing Date	July 31, 2000
First Named Inventor	Babinski et al.
Group Art Unit	1751
Examiner Name	E. Elhilo
Attorney Docket Number	J-2990

ENCLOSURES (check all that apply)

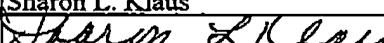
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group		
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences		
<input checked="" type="checkbox"/> Amendment/ Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)		
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information		
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter		
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):		
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Associate Power of Attorney		
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund			
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____			
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application				
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53				
<table border="1"> <tr> <td>Remarks</td> <td>IF THERE ARE ANY CHARGES, PLEASE CHARGE TO OUR DEPOSIT ACCOUNT 10-0849.</td> </tr> </table>			Remarks	IF THERE ARE ANY CHARGES, PLEASE CHARGE TO OUR DEPOSIT ACCOUNT 10-0849.
Remarks	IF THERE ARE ANY CHARGES, PLEASE CHARGE TO OUR DEPOSIT ACCOUNT 10-0849.			

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Herbert W. Mylius S. C. Johnson & Son, Inc.
Signature	
Date	December 19, 2001

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date:

Typed or printed name	Sharon L. Klaus
Signature	
Date	12/19/01

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